

CLAIMS

SERIAL NO.
555425

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*		*		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	
1							51					
2							52					
3							53					
4							54					
5							55					
6							56					
7							57					
8							58					
9							59					
10							60					
11							61					
12							62					
13							63					
14							64					
15							65					
16							66					
17							67					
18							68					
19							69					
20							70					
21							71					
22							72					
23							73					
24							74					
25							75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
TOTAL IND.			2		4		TOTAL IND.					
TOTAL DEP.			20		19		TOTAL DEP.					
TOTAL CLAIMS			22		23		TOTAL CLAIMS					

MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

CLAIMS ONLY

Application Number

09555425

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	✓		✓				51					
2		✓		✓			52					
3	✓		✓				53					
4							54					
5							55					
6		✓		✓			56					
7		✓		✓			57					
8		✓		✓			58					
9							59					
10		✓		✓			60					
11		✓		✓			61					
12		✓		✓			62					
13		✓		✓			63					
14		✓		✓			64					
15		✓		✓			65					
16		✓		✓			66					
17		✓		✓			67					
18		✓		✓			68					
19		✓		✓			69					
20		✓		✓			70					
21		✓		✓			71					
22		✓		✓			72					
23		✓		✓			73					
24	✓		✓				74					
25	✓		✓				75					
26							76					
27							77					
28							78					
29							79					
30							80					
31							81					
32							82					
33							83					
34							84					
35							85					
36							86					
37							87					
38							88					
39							89					
40							90					
41							91					
42							92					
43							93					
44							94					
45							95					
46							96					
47							97					
48							98					
49							99					
50							100					
Total Indep	4		4				Total Indep					
Total Depend	18		18				Total Depend					
Total Claims	22	C	22	D			Total Claims					